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CONFIRMATION NO. 8794

SERIAL NUMBER 10/521,455	FILING OR 371(c) DATE 01/14/2005 RULE	CLASS 623	GROUP ART UNIT 3738	ATTORNEY DOCKET NO. 26569U
APPLICANTS Helmut Goldmann, Tuttlingen, GERMANY; ** CONTINUING DATA ***** <i>AS</i> This application is a 371 of PCT/EP04/05162 05/14/2004 ** FOREIGN APPLICATIONS ***** <i>AS</i> GERMANY 103236767 05/15/2003				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <i>AS</i> Examiner's Signature _____ Initials _____		STATE OR COUNTRY GERMANY	SHEETS DRAWING 0	TOTAL CLAIMS 18
INDEPENDENT CLAIMS 1				
ADDRESS 20529				
TITLE Implant having a long-term antibiotic effect				
FILING FEE RECEIVED 900	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	